

The attached notice would be sent in the following situation:

- Expedited Approval for FoodShare (3 months run)
- Primary person language preference is not English, Spanish, or Hmong
- Family Medicaid with premium (1 month retroactive) (note: used the term Full Benefit Medicaid for now – which will eventually be BadgerCare Plus)

MILWAUKEE COUNTY DSS  
1220 W VLIET ST  
MILWAUKEE WI 53205

Date: 1/23/2007

MARGE SIMPSON  
1 MAIN ST APT 1  
MILWAUKEE WI 53210



**State of  
Wisconsin**

**Case #**  
123456789



**Milwaukee County Change Center**  
(414) 289-6000



<Translated> For help with getting this letter explained in your language, please call 1-888-323-3232. <Translated>

## About Your Benefits

This letter tells you about your benefits. If you have a question, please call the local agency listed above. If you need help because of a disability, please see the Key Contacts on the last page of this letter.

Which benefit?	Status of your benefits?
 Health Care	You applied on Jan. 22, 2007. Your application was approved for some of the people in your home. To find out who was approved and who was denied, see page 2.
 FoodShare	You applied on Jan. 22, 2007. Your application was approved. For Jan. 2007, you will get \$114 and for Feb. 2007, you will get \$354. To keep getting benefits after Feb. 2007, you will need to give us proof of items like your address, income and bills. Please see page 3 to learn more.
<i>If you don't agree with this decision, you have the right to a Fair Hearing. Please see the last page of this letter to learn more. You may also talk with the local agency listed above.</i>	



## Your Health Care Benefits



**Who is eligible for health care benefits?**

**When?**

As of  
Dec. 1, 2006

**Who is eligible?**

MARGE S  
BART S  
LISA S

**Which plan?**

BadgerCare+  
Standard

**Do you have to pay a premium?**

Yes – see below

MARGE S, BART S, LISA S: You will get the health care benefits shown above until there is a change in your case.



**Who has to pay a premium?**

**When?**

As of Dec. 1, 2006

**Monthly amount?**

\$125

**Who does it cover?**

MARGE S  
BART S  
LISA S

MARGE S: Your premium is a fee you must pay each month to keep getting benefits. You will get a premium payment notice in the mail each month.



**More information**

### BadgerCare+ Standard

This program is a full-benefit health care plan. It will pay for most services from BadgerCare Plus health care providers. It will also pay for prescriptions (unless you are also getting Medicare). You may have a small co-payment for some services.

### Forward Card

If you are getting health care benefits for the first time, you will get a Forward Card and an Eligibility & Benefits handbook by mail. Be sure to tell your health care providers that you now have these benefits. In some cases, a provider may be able to give you a refund for bills you paid after your health care benefits started.



**Which health care benefits have ended or been denied?**

**When?**

As of  
Dec. 1, 2006

**Which plan?**

BadgerCare+  
Standard

**Who and why?**


MICHAEL S: The person who applied asked that you not get this benefit.


MICHAEL S: You are not a U.S. citizen or the type of immigrant who is able to get this benefit.


Supporting Laws: HSS102.02WAC, 49.665 STS, 49.45(24r) STS



## Your FoodShare Benefits

 <b>Who is eligible for FoodShare and how much?</b>	When?	How much?	Who is eligible?	
	Jan. 22, 2007 - Jan. 31, 2007	\$114/month	MARGE S LISA S	BART S
	Feb. 01, 2007 - Feb. 28, 2007	\$354/month	MARGE S LISA S	BART S
<p>You applied for FoodShare on Jan. 22, 2007. Because you applied after the first day of the month, you will get a lower FoodShare benefit in January.</p> <p>Because you needed FoodShare right away, you did not have to give us proof of items like your address, income and bills when you applied. To keep getting FoodShare after Feb. 28, 2007, you will need to give the proof that your local agency asks for.</p>				

 <b>More information</b>	<p><b>FoodShare</b> FoodShare is a monthly benefit that helps you buy nutritious food for good health. FoodShare benefits come on a plastic card, called the Wisconsin QUEST Card, which you can use just like a bank card at most food stores. To learn more about using your FoodShare benefits, please see your Eligibility &amp; Benefits handbook.</p> <p>If you are getting FoodShare for the first time, you will get a QUEST Card and an Eligibility &amp; Benefits handbook by mail. Your benefits for Jan. and Feb. will be in your account by Jan. 23, 2007.</p>
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 <b>Who is NOT eligible for FoodShare and why?</b>	When?	Who and why?
	As of Jan. 22, 2007	MICHAEL S: You are not a U.S. citizen or the type of immigrant who is able to get this benefit.




Wisconsin JobNet is available to you. JobNet is the largest source of job openings in Wisconsin. You can visit the JobNet website at [www.dwd.state.wi.us/jobnet/mapWI.html](http://www.dwd.state.wi.us/jobnet/mapWI.html). Or, you can use touch-screen computers at your local Job Center. To find a Job Center near you, call 1-888-258-9966.

## Your Household's Income and Bills


Here is a list of the income and bills that we have on file for your household.


 Your Household's Income			
Who has income?	When and how much?		
	Dec. 2006	Jan. 2007	As of Feb. 2007
MARGE S Job: WEST ALLIS CHURCH	\$580.00 every other week	\$580.00 every other week	\$0.00
BART S Child Support Received	\$500.00 each month	\$520.00 each month	\$520.00 each month

 Your Household's Bills			
Type of bill	When and how much?		
	As of Dec. 2006		
Rent	\$200.00 each month		
Medical Bills	\$600.00 each month		
Child Support Paid	\$200.00 each month		
Utilities	Yes*		
* We have on file that you had utility bills for these months.			

## How We Counted Your Income

Here are the amounts and limits that were used to decide whether you could get benefits. To learn more about the limits and credits that were used, please see your Eligibility & Benefits handbook.

 BadgerCare+ Standard			
	Dec. 2006	Jan. 2007	As of Feb. 2007
<b>Your Gross Income</b>	\$1660.00	\$1680.00	\$520.00
<b>Your Counted Income</b>	\$1424.23	\$1424.23	\$405.00
<b>Counted Income Limit</b>	\$1581.67	\$1581.67	\$1581.67
Your counted income is lower than your gross income because you get a credit for these items: child support payments.			

 FoodShare			
	Jan. 2007	Feb. 2007	
<b>Your Gross Income</b>	\$1680.00	\$520.00	
<b>Your Counted Income</b>	\$1224.23	\$305.00	
<b>Counted Income Limit</b>	\$2020.00	\$2020.00	
Your counted income is lower than your gross income because of a standard credit that everyone gets. You also get a credit for these items: housing/utility bills, medical bills, child support payments. You also get a credit for working.			



## Your Reporting Rules

Based on the benefits you are getting, you must tell your local agency within 10 days if you have a change in where you live or where you are staying, or if someone moves in or out of your home. You must also report if someone gets married or divorced, or if your household's total monthly income (before taxes) goes over \$1,581. Keep in mind that if your benefits change, your reporting rules may also change.

## Key Contacts

**Disability Services:** If you have a disability and need this letter in another format, call 1-888-888-8888. Translation and TTY services are available at no cost to you.



**Online Help:** ACCESS is an internet tool that lets you apply for other benefits, check your benefits or report changes. Visit [access.wisconsin.gov](http://access.wisconsin.gov).

**General Questions about FoodShare or Health Care Benefits or your Forward Card:** See your Eligibility & Benefits handbook or go to [dhfs.wisconsin.gov/customers](http://dhfs.wisconsin.gov/customers). Or, call 1-800-362-2002 (TTY and translation services are available).

**QUEST Card:** Call 1-877-415-5464 (voice) or 1-800-947-3529 (TTY) if your QUEST card is damaged, stolen or lost; if you get an error message while using your card; to check your account balance; or, if you have other questions about your QUEST card.

**Any Other Questions:** See the contact information for your local agency on page 1.



## YOU HAVE THE RIGHT TO A FAIR HEARING ABOUT YOUR BENEFITS

### What is a Fair Hearing and why should I ask for one?

A Fair Hearing gives you the chance to tell why you think there has been a wrong decision about your application or benefits. At the hearing, a hearing officer will hear from you and the local agency to find out if the decision was right or wrong. You may bring a friend or family member with you to the hearing. You may also be able to get free legal help. To learn more about free legal help, call 1-888-888-8888.

### How long do I have to ask for a hearing?

The Division of Hearings & Appeals must get your request for a hearing about the decision in this letter by the date below:

FoodShare	→	Apr. 24, 2007
Health Care	→	Mar. 11, 2007

If you are getting FoodShare benefits, keep in mind that you can ask for a hearing at any time if you don't agree with the benefit amount.

### Can I keep my benefits while I wait for my hearing?

Yes, if you are already getting benefits and if you ask for a hearing before your benefits change, you can keep getting the same benefits until the hearing officer makes a decision. If the hearing officer decides that the State was right, you may need to return the extra benefits that you got between the time you asked for your hearing and the time that the hearing officer decides about your case.

### How do I ask for a hearing?

You can ask for a hearing and/or a hearing request form at the agency shown on the first page of this notice. Or, you can get a request form at [www URL link TBD]. You can send the form or a letter asking for a hearing to the Division of Hearings & Appeals, PO Box 7875, Madison, WI 53707-7875, or fax it to 608-264-9885. If you need help with asking for a hearing, please call 1-800-362-3002.